Approved For Release 2006/11/ਿ3 ³ 5 ਹੈ ਕਿਵਲੇ ਹੈ 1000100140039-0															
REPORTS INVENTORY												CONTROL NO.			
PREPARE IN DUPLICATE												DDS/OTR/EA - 3			
i. TITLE OF REPORT (if a fill-in report include Form No.)											2. TYPE	х	STATISTICAL		
												OF REPORT	×	NARRATIVE	
Agency Training											WEF ON I		MACHINE-NAME LISTING		
		X	PERSONNEL				x	TRAININ			ADMIN. GENERAL				
3. FUNCTIONAL A	X	LOGISTICS				X	SECURIT			OTHER (specify)					
l x			MEDICAL				X FINANCE				Clandestine Service				
4. NO. OF COPIES PREPARED 5. FREQUENCY (weekly, monthly, quarterly, etc.)										tc.)	6. DISTRIBUTION (No. of components not number of copies)				
Original	Annually								2						
7. FORMAT (memo	8. ADP PROCESSING							9. DI	9. DIRECTIVE AUTHORITY REQUIRING REPORT						
computer print-out, etc)			YES IF YES GIVE ADP PROCESSING NO.						NG NO.						
Memo	X 140								cut	cutive Director-Comptroller					
10. PREPARING COMPONENT (include lowest level II. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)															
EA/Plans 9 Approx. 110 forms completed in duplicate by com-															
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ponents submit info in memo form4 memos on															
12. COST FACTORS components; 5 on schools)															
	A. MANUAL PREPARATION AND REVIEW COSTS														
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